Effective December 29, 1999														
CLAIMS AS FILED - PART I (Column 1) (Column 2)										LL E	NTITY	OR	OTHER SMALL I	
FOR			NUMBE	R FILED		NUMBER 6	XTRA	[	RATI	ĒΊ	FEE		RATE	FEE
BASIC FEE			_								345.00	OR		690.00
TOTAL CLAIMS			minus 20= •					Ĭ	X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 = *						X39=			OR	X78=	
MULTIPLE DEPENDENT CLÁIM PRESENT								Ì	+130=			OR	+260=	/
* If the difference in column 1 is less than zero, enter "0" in column 2									TOTAL			OR	TOTAL	690
(Column 1) (Column 2) (Column 3)									SMALL ENTITY OR				OTHER THAN SMALL ENTITY	
AMENDMENT'SE	D	REMA AF	AIMS AINING TER IDMENT		   Pi	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE
NON	Total	. 14	0	Minus	••	20	= -		X\$ 9	=		OR	X\$18=	
AME	Independent	• /	N OF M	Minus		<u> </u>	=		X39:	=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										)=		OR	+260=	
										TAL		OR	TOTAL ADDIT. FEE	
		(Colu	umn 1)		((	Column 2)	(Column 3)	,	AUUI I. I				7.001 · 22	
AMENDMENT B		REM.	AIMS AINING TER IDMENT		Р	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•		Minus			=		X\$ 9	)=		OR	X\$18=	
	Ind pendent	·		Minus	<u></u>		=		X39	=		OR	X78=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+130	\			+260=	
										TAL		OR	TOTAL	
									ADDIT.			OR	ADDIT. FEE	
_	· · · · · · · · · · · · · · · · · · ·		umn 1) AIMS	1		Column 2) HIGHEST	(Column 3)					1		
AMENDMENT C		REM AF	AINING FTER NDMENT		P	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total			Minus		•	=		X\$ 9	)=		OR	X\$18=	
	Independent	٠		Minus		••	<b>a</b>		X39	=		OR	X78=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											1	.000	<del>                                     </del>
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												+260=		
••	If the "Highest Nu "If the "Highest Nu	ımber Pro	eviously P	aid For IN TH	IIS SF	PACE is less the	an 20, enter "20.	.*	ADDIT.		L	OR	ADDIT. FEE	
	The "Highest Nur	nher Pre	viously Pa	id For (Total	or Ind	lenendent) is th	e highest numbe	er fo	und in th	ne an	propriate bo	x in c	olumn 1.	

**Application or Docket Number**